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Case Study

VIDANGADI TAILA NASYA IN MANAGEMENT OF *VATAJA PRATISHYAYA*

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ABSTRACT

Vataja Pratishyaya which can be correlated to allergic rhinitis which is a prevalent condition characterized by symptoms such as nasal obstruction, rhinorrhea, sneezing, etc. In Ayurveda, it is classified as a *Pranavaha Srotas Vikara* (upper respiratory tract diseases), primarily resulting from the vitiation of *Vata Dosha*, leading to irritation in the nasal passages. This imbalance can be triggered by factors like exposure to allergens, environmental pollutants, and seasonal changes. *Acharya Sushruta* stated five distinct types of *Pratishyaya*, among which *Vataja Pratishyaya* is considered the most prevalent. It is considered a causative factor for various diseases and is given significant importance in *Shalakya Tantra*. *Nasya Karma* of *Vidangadi Taila* through the nostrils, is a treatment chosen for study in *Vataja Pratishyaya*. The treatment was aimed at pacifying aggravated *Vata* and *Kapha Doshas.* This procedure helps in lubricating the nasal mucosa, expelling accumulated *Doshas*, and restoring balance to the affected *Doshas*. The present study was planned to evaluate the nature of disease, its course and management with Ayurvedic therapy and to develop evidence-based support for effect of *Vidangadi Taila Nasya* in *Vataja Pratishyaya* as mentioned in *Gadanigraha.*

INTRODUCTION

Pratishyaya is considered as a causative factor for almost all diseases in *Shalakyatantra. Vataja Pratishyaya* is a prevalent condition that affects individuals of all ages and genders. *Acharya Vagbhata* has stated that vitiated *Vata* along with *Kapha* and *Pitta* blocks the nasal pathway by gathering in *Nasa* which leads to *Pratishyaya*.[1] Clinical features of *Vataja Pratishyaya* can be correlated with allergic rhinitis.

Allergic rhinitis is an allergic condition where the immune system overreacts to airborne allergens like pollen or dust. It is caused by an IgE-mediated reaction that leads to the release of histamines from mast cells, resulting in symptoms such as sneezing, runny nose, nasal congestion, and itching. These symptoms are usually reversible with or without therapeutic intervention.[2]

In *Ashtanga Sangraha*, it is explained that *Nasa* being the entry to *Shira*, the drug administered through nostril reaches *Shringataka Marma*, a *Sira Marma* by *Nasa Srotas* and spreads in the *Murdha*, reaches at the junctional place of *Netra, Shrotra, Kantha Siramukha* and remove or detach the morbid *Dosha* present above supraclavicular region and expel them from the *Uttamanga*.[3]

The nose, being highly vascular with an absorbent mucous membrane, allows effective absorption of *Siddha Sneha* formulations. Upon administration, *Sneha* spreads across the nasal mucosa, where its active components are absorbed through the olfactory and respiratory pathways and transported throughout the body. *Sneha* also nourishes the nasal and related cranial structures. The nasal blood and lymphatic vessels have connections with the subdural and subarachnoid spaces, facilitating drug transport into the cranial cavity. Since the myelin sheath of nerves is lipid-rich and the blood-brain barrier allows fat-soluble substances to pass, *Sneha's* lipid-based components can penetrate the central nervous system and help exert their *Vataghna* (*Vata*-pacifying) effects.[4,5]

AIM AND OBJECTIVE

Aim: To study the effect of *Vidangadi Taila Nasya* in *Vataja Pratishyaya* w.s.r allergic rhinitis.

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Objective: To give relief to the patients from symptoms of *Vataja Pratishyaya.*

Case History

A 30-year-old female patient visited the outpatient department of *Shalakyatantra* on 17/05/2025, with complaints of continuous sneezing, runny nose and blockage in nose since the last few months. No past medical history and no known allergy till today. After assessing the symptoms diagnosis was made as *Vataja Pratishyaya* and the presence of eosinophil in the nasal smear of the patient under the microscope was noted for diagnosis.

Informed Consent

The purpose of the study, nature of the study drugs, the procedure to be carried out and potential risk and benefits were explained to the patients in detail in non-medical terms. Their written and informed consent was taken before the procedure.

Examination of Nose

1. Inspection: Swelling of the nasal mucosa, thin secretions.
2. Anterior Rhinoscopy: Lower and anterior part of septum, middle turbinate appears red, floor of the nose red, mucosa red, septum normal.
3. Obstruction of nose/Nasal Patency: No nasal polyps.

Mode of administration and Dose

Name of Drug- *Vidangadi Taila Nasya* [6]

Route of administration - Nasal

Duration- 7 days

Dose - 6 drops in the evening, before consumption of food.

Examination done on 0th day follow up on 4rd, 7th day.

MATERIALS AND METHODS

Standard Operating Procedure (SOP) of *Vidangadi Taila Nasya*

Step 1- *Churna* of *Vidanga, Saindhava, Yashtimadhu, Devdaru,* and *Trikatu* purchased from authentic source. Authentication of raw drug material done.

Step 2- *Vidangadi Taila* prepared in Ayurvedic pharmacy as described below. *Vidangadi Dravya Kalka* prepared. (*Vidanga, Saindhava, Yashtimadhu, Devdaru, Trikatu Churna* mixed well with water). Then 1 part of *Kalka*, 4 parts *Tila Taila* and 4 parts of water boiled together till *Taila Siddha Lakshana* are seen. Standard aseptic precaution will be taken during preparation of the drug.

Step 3- By using ethylene oxide, sterilization of the *Nasya* container (plastic bottle) and dropper is done. Then *Siddha Taila* will be filled in a sterile plastic bottle under all aseptic conditions. Microbial load examination of *Sidhha Taila* done.

Nasya Karma Vidhi

Purvakarma- *Vidangadi Taila* before instilling made mild Luke warm in a double boiler. Patient instructed to lie down on the *Nasya* table and then *Stanika Snehana* (i.e. oleation of face and neck) done by using lukewarm *Tila Taila*. Following the oleation, the patient's eyes were then covered by *Stanika Swedana* by *Hastatapa Sweda* (i.e. fomentation) done. Then the patient instructed to lie down with the chin lifted slightly in supine position.

Pradhankarma- After positioning the patient appropriately, six drops of *Vidangadi Taila* were administered into one nostril. The patient was advised to remain in that position until the medicine reached the throat. Once it did, she was instructed to expel any impurities and residual medicine. No adverse reactions were observed during the procedure.

Paschatkarma - Patient was requested for *Gandusha* (gargle) with lukewarm water. Patient was instructed to cover her head and face and to take *Laghu*, *Snigdha*, *Supachya aahara.*

Image 1: *Nasya* Procedure

Inclusion criteria

- Patients of age group 18 to 60 years, irrespective of their gender, religion and socio-economic status.
- Patients with indications *Nasya Karma*.

All patients having signs and symptoms-

1. *Nasavrodha* (nasal congestion)
2. *Tanustrava* (rhinorrhoea)
3. *Kshavathu* (sneezing)

Exclusion criteria

- Pregnant women and children.
- History of congenital disorder of nose.
- Patients with nasal polyp, tumours requiring surgical intervention.
- Patients with contra-indications of *Nasya Karma.*

Subjective Parameter

Table 1: Subjective Parameter

Lakshana	**Score**
***Nasavrodha* - Nasal Obstruction**	
No obstruction	0
Partial, occasional and unilateral inhalation and exhalation with efforts with feeling of mild obstruction.	1
Complete, frequently and unilateral inhalation and exhalation to be supplemental with mouth breathe.	2
Complete blockage bilateral with total mouth breathing.	3
***Tanustrava*– Rhinorrhoea/watery discharge**	
No discharge	0
Occasional Rhinorrhoea with a feeling of running nose without visible fluid.	1
Rhinorrhoea with an occasional running nose with visible fluid which needs moping but controllable.	2
Severe rhinorrhoea which needs continuous moping	3
***Kshavathu* - Sneezing**	
No sneezing	0
1 to 10 sneezing per day	1
11 to 20 sneezing per day	2
> 20 sneezing per day	3

Objective Parameter

Nasal smear eosinophil % carried out before and after completion of treatment. After the observation the data is collected and presented in the table form.

OBSERVATION

Table 2: Observation Table

Lakshana	0th day	4th day	7th day
Nasavrodha	2	1	0
Tanustrava	2	2	1
Kshavathu	2	1	0

Table 3: Observational Table for Nasal Smear Eosinophil

Eosinophil in nasal smear	0th Day	7th Day
Eosinophil % in lymphocytes	18 %	2 %

RESULTS AND DISCUSSION

The patient of *Vataja Pratishyaya* (allergic rhinitis) having symptoms like *Nasavrodha* (nasal blockage), *Tanustrava* (watery discharge), *Kshavathu* (sneezing), are treated with *Vidangadi Taila Nasya* shows significant relief.

Vataja Pratishyaya is a *Nasagata Roga* described in Ayurvedic *Samhitas*, in which there is vitiation of *Vata* and *Kapha Dosha* causes *Kshavathu, Tanustrava, Nasavrodha, Gala Talu Shushkata, Shirahshoola*. It can be correlated with allergic rhinitis in modern science.

The *Nasya* medication helps in building the immune system of the body because in allergic rhinitis, the immune system responds with resistance against the allergens. *Vidanga* is analgesic, anti-microbial and anti-fungal which helps in reducing headache and prevents secondary infections. *Yastimadhu* has *Madhura Rasa* with *Guru* and *Snigdha Guna*. It is *Tridoshahara*, *Rasayana* which helps in building the immune system of the body. *Devadaru* is antioxidant, anti-inflammatory, *Kapha nissaraka, Lekhana, Rasayana* and *Shotha hara. Saindhava* has *Vatahara* property. It liquefies the mucous secretions and so by that relieves *Nasavarodha*. *Shunti* has volatile oil which stimulates the olfactory bulb in the brain and then relieves anosmia. *Maricha* has anti-inflammatory

action. *Pippali* has *Rasayana*, anti-allergic, immuno-stimulant, analgesic, anti-inflammatory action and effective in diseases of *Pranavaha srotasa* as *Vataja Pratishyaya* is *Pranavaha Sroto Vyadhi. Tila Taila* is the best drug for *Vata dosha*.[7] Here the chronicity of the disease indicates aggravation of *Vata dosha*, so oil preparation is the best form for conditions like allergic rhinitis. Hence *Vidangadi Taila Nasya* is selected for study to find an effective remedy for *Vataja Pratishyaya.*

CONCLUSION

From the above study it could be concluded that *Vataja Pratishyaya* (allergic rhinitis) is *Vata kapha* predominant *Vyadhi.* It is similar to allergic rhinitis in modern science and no drug ensures total relief without any side effects and the chances of recurrences are relatively high. *Vidangadi Taila Nasya* shows satisfactory curative effect on *Vataja Pratishyaya*. No significant adverse effect has been observed during the course of therapy.

Scope of study

- Allergy vaccine therapy (immunotherapy) for recurrence of allergic rhinitis.
- Study can be done on larger population for longer duration of time as it has less to no side effects.
- *Vataja Pratishyaya* can be treated by using other *Kriyakalpanas* than the *Nasya.*

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